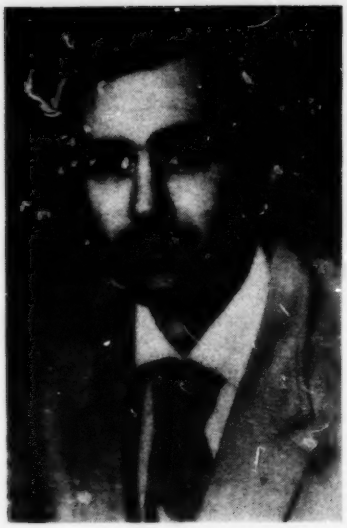
ADDICTION SERVICES

OF

PRINCE EDWARD ISLAND

ANNUAL REPORT

1985 - 1986



Charlottetown
Prince Edward Island
March 31, 1986

The Honourable Lloyd G. MacPhail
Lieutenant Governor of Prince Edward Island

May It Please Your Honour:

I beg to submit, herewith, for your consideration the annual report of Addiction Services of Prince Edward Island for the fiscal year ended March 31, 1986.

I have the honour to be,
Sir,
Your obedient servant,

Keith Milligan
Minister Responsible
Addiction Services of
Prince Edward Island

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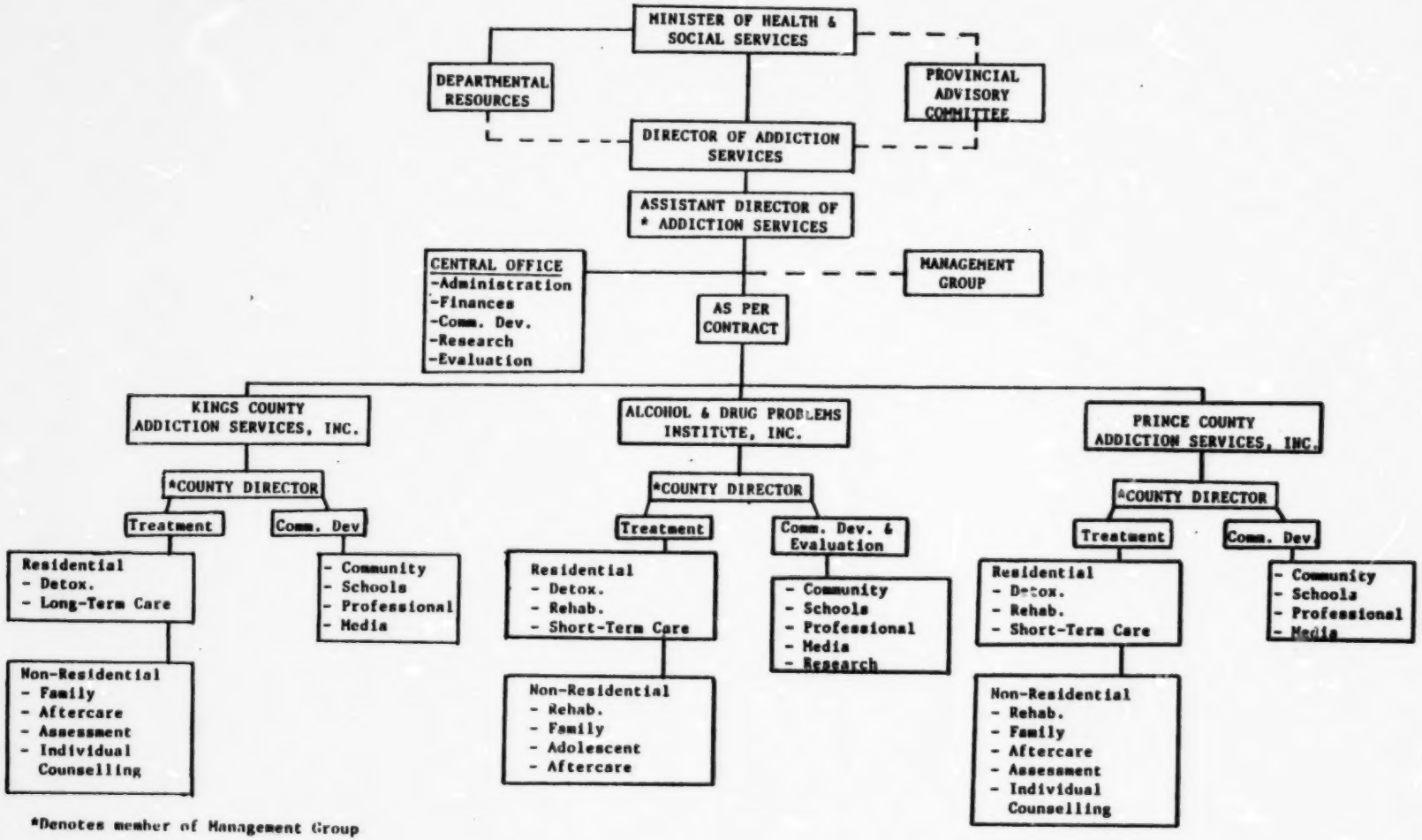

*Denotes member of Management Group

ADDICTION ADVISORY COMMITTEE

APRIL 1, 1985 - MARCH 31, 1986

Dr. Mark Triantafillou, Chairman

Mr. Peter Driscoll

Dr. Leo Killorn

Mr. Wilber Lamont

Mr. Peter McQuaid

Mr. Alan Nicholson - Resigned in May, 1985

Mr. Maynard Schurman

Mr. George Whiteway - Appointed in October, 1985

Mr. Neil Young, Addiction Services of P.E.I. Representative

CENTRAL OFFICE

P.O. Box 37
McGill Avenue
Charlottetown, P.E.I.
C1A 7K2

TELEPHONE: 892-4265

CENTRAL OFFICE

The general mandate of Central Office, Addiction Services of Prince Edward Island is to establish guidelines and engage in an ongoing monitoring and evaluation process with the contracted county agencies; to be responsible for the development and implementation of research and evaluation programs of a provincial nature; to coordinate training and prevention programs as requested by the counties; and to oversee the management of financial matters in consultation with the county agencies.

The Provincial Advisory Committee, chaired by the Director of Addiction Services, advises the Minister on matters of a provincial nature. This Committee consists of the Director of Addiction Services, the Assistant Director of Addiction Services, the Presidents of the three county boards, and a community representative of each of the counties.

The Director of Addiction Services reports directly to the Minister. The Director is the provincial representative on the federal-provincial "Sub-Committee on Alcohol and Other Drug Problems" and the regional group of the four directors of addiction agencies in the Atlantic provinces. The Assistant Director consults with the three County Directors to discuss common concerns and possible joint ventures. The Assistant Director supervises the Central Office staff in their efforts to carry out their mandate. The Community Development Coordinator is the Addiction Services representative on the National Planning Committee, a working group of the "Sub-Committee on Alcohol and Other Drug Problems" and on the "P.E.I. Council on Smoking and Health."

To better serve the needs of the chemically dependent person and/or their families, Central Office works closely with Kings County Addiction Services, Alcohol & Drug Problems Institute and Prince County Addiction Services. Each county addiction service operates under the direction of a board which sets policy, allocates funds and hires a county director to administer programs and to continue to develop, implement and maintain community development and treatment programs as required in the contracts with Government.

PROVINCIAL COMMUNITY DEVELOPMENT/PREVENTION PROGRAMS

Provincial Community Development/Prevention programs are coordinated by the Community Development Coordinator, Central Office, who works on a consultation basis with county personnel. On the regional level, the Coordinator worked with the three other drug dependency commissions in the planning of the fifth annual Drug Awareness Week held the third week in November.

The Central Office Community Development Coordinator met on a regular basis with her county counterpart of each of the three county services in order to coordinate their efforts in presenting of materials to the school students as well as to work together on various other concerns of a provincial nature. An important yearly function of the committee is the cooperative effort in the organization and presentation of events and advertising for Drug Awareness Week 1985.

A literature supply, consisting of pamphlets, books and periodicals, was maintained for use by the county services as well as the general public. Central Office participated in the Law Day Display, the mini Health Fair and the Island Tel Family Night.

The staff of the three county services participated in a skill development workshop coordinated by Central Office and conducted by Mr. Jack Blanchard, Student Services, University of Prince Edward Island.

A number of information/training sessions were presented to various groups, particularly groups in the health related field. The presenters in these sessions included various staff members of Kings County Addiction Services, Alcohol and Drug Problems Institute, and Prince County Addiction Services.

INFORMATION/TRAINING SESSIONS COORDINATED BY CENTRAL OFFICE

Number of Sessions	33
Attendance at Sessions	509
Number of Individuals	373

KINGS COUNTY ADDICTION SERVICES

Breakwater Street
P.O. Box 100
Souris, P.E.I.
C0A 2B0

TELEPHONE: 687-2150

BOARD OF DIRECTORS
KINGS COUNTY ADDICTION SERVICES
APRIL 1, 1985 - MARCH 31, 1986

Mr. Peter McQuaid, Chairman

Mr. Louis Callaghan

Sr. Elizabeth Dunn

Mrs. Mellie Glover

Mr. Jim MacDonald

Mr. Joseph MacKinnon

Mr. Roddie MacLeod

Fr. Mervyn McNally

Fr. Edwin Steele

Mrs. Marjory Tattrie

MANAGEMENT PERSONNEL

Mrs. Peggy MacInnis, R.N.	Kings County Director
Ms. Maureen McIver, R.N.	Nursing Supervisor
Mr. Alfred Egan, B.A., B.Ed.	Community Development Coordinator
Dr. Don Vickerson	Medical Consultant

DETOXIFICATION PROGRAM

The Kings County Detoxification Unit is located in Souris on Breakwater Street. It is a twelve-bed facility and is functional throughout the entire fiscal year.

The primary function of the Unit is to provide a protective setting which allows clients to withdraw safely from alcohol and other drugs under medical supervision.

A second function is that of motivating and guiding clients to further treatment. This is done through individual counselling, lecture-discussion groups and through referral to other Addiction Services programs as required.

A third function is that of providing support to individuals who are sober but are experiencing some severe sobriety-based symptoms of alcoholism. To that end we will admit for stabilization and counselling.

STATISTICAL SUMMARY

Total Number of Admissions	564
Total Number of Male Admissions	537
Total Number of Female Admissions	27
Total Number of New Admissions	63
Total Number of Individuals Admitted	258
Total Number of Male Individuals	240
Total Number of Female Individuals	18
Average Age	45.6 years (Male)
	41 years (Female)
Average Length of Stay	4.7 days (Male)
	5.2 days (Female)
Residential Individual Counselling Sessions	374

NON-RESIDENTIAL SERVICES

The following services are provided on a non-residential basis, by Addiction Workers:

Aftercare

This is a program available to all chemically dependent persons who have completed a rehabilitation program, either residential or non-residential. It is conducted by staff and other chemically dependent persons who have several years sobriety and are well established in a program of Alcoholics Anonymous. The recommended length of stay in this program is one year, with attendance on a weekly basis.

STATISTICAL SUMMARY

Number Group Sessions	132
Number in Attendance	1,892
Average Group Size	14

Follow-up

This group therapy program is designed for chemically dependent persons who have gone through a detoxification program but who have not as yet had a rehabilitation program. After discharge from Detoxification, it is recommended that people attend one follow-up meeting per week at the Detoxification Unit for a period of six months. Clients are also encouraged to become involved in the Alcoholics Anonymous program.

STATISTICAL SUMMARY

Number Group Sessions	53
Number in Attendance	724
Average Group Size	14

Non-Residential

Number Non-Residential Counselling Sessions	447

Highway Safety Division

Number Highway Safety Assessments	61

COMMUNITY DEVELOPMENT

In July, 1985 Alfred Egan was hired as Community Development Coordinator to provide information and prevention programs in the schools and communities, in an effort to raise public awareness concerning chemical dependency.

STATISTICAL SUMMARY

Number of Classroom Sessions	63
Total Number Attending	1,487
Number of Community Sessions	15
Total Number Attending	293

LONG-TERM CARE CENTRE

This 10-bed Long-Term Care facility in Georgetown continues to accommodate people from all three Counties who suffer from chronic chemical dependencies. The length of stay varies with the individual needs of the client.

The Georgetown House continues to operate with a supervisor and two attendants who cover the evening and week-end shifts. A night watchman, hired under the Job Creation Program, is on duty from 12:00 a.m. until 8:00 a.m. to make regular rounds inside and outside the house in an effort to protect the property against fire or vandalism.

A program is conducted daily which consists of group discussion, individual counselling, films, life skills, residential and community A.A. After a suitable period of time, when residents are adjusted to the Long-Term Care Program, they are encouraged to seek employment.

STATISTICAL SUMMARY

Total Number of Admissions	45
Total Number of Individuals	40
Average Length of Stay	50 days
Average Age	49 years
Occupancy Rate	65%
Total Number Days Stay	2,391

INFORMATION AND DROP-IN CENTRE

The Information and Drop-In Centre in Montague continues to be staffed on a daily basis by a receptionist, hired under the Job Creation Program. Video and cassette tapes are used in the daily information presentations on alcohol and other drug use.

Other programs conducted by an Addiction Worker are weekly Family programs, Follow-up, Aftercare, individual counselling and assessment interviews for Highway Safety Division.

Current material on alcohol and other drugs may be picked up from the display racks.

The Kings County Addiction Auxiliary continues to provide informational material for use in the various programs.

STATISTICAL SUMMARY

Number of Visits	2,049
Number of Individuals	550

FAMILY INFORMATION PROGRAM

This program consists of films, lectures and group discussions and recycles every seven weeks. Although this program is intended for family and friends of chemically dependent persons, any interested person may attend.

Those attending are encouraged to become involved with the Al-Anon program and are offered a contact. Our goal is to have full involvement of the family in the treatment process. However, our efforts are hampered by the fact that we do not have the services of a Family Counsellor. This work is being shared in part by an Addiction Worker, Nursing Supervisor and County Director.

A full-time Family Counsellor is needed in this County, as much more work needs to be done in this very important area of our services.

STATISTICAL SUMMARY

Number of Group Sessions	46
Number in Attendance	151
Family Counselling Sessions	184

QUEENS COUNTY ADDICTION SERVICES

McGill Avenue
P.O. Box 1832
Charlottetown, P.E.I.
C1A 7N5

TELEPHONE: 892-4265

BOARD OF DIRECTORS

ALCOHOL AND DRUG PROBLEMS INSTITUTE

APRIL 1, 1985 - MARCH 31, 1986

Dr. Leo Killorn, President
Mr. Jack Blanchard
Mr. Gerry Birt - became member February 1986
Mr. Jim Brady
Mr. Joe Dorsey - resigned June 1985
Dr. Raymond Grant - resigned November 1985
Mrs. Helen Killorn
Ms. Gladys MacMillan
Mr. Mike O'Brien
Mr. John Richard - term expired September 1985
Mr. Albert Ross
Rev. Susan Triantafillou
Mr. Gordon Tweedy
Mr. Freeman Whitty

MANAGEMENT PERSONNEL

Dr. Leo Killorn	Queens County Director Medical Consultant
Sister Bertha McCarthy, R.N.	Nursing Supervisor Detoxification Unit
Mr. Frank Blackett	Food Service Manager
Mr. Peter MacLean	Manager, Halfway House

OVERVIEW OF 1985-86

During the fiscal year 1985-86, once again there were no major changes in the basic format or staffing of the major programs being presented by the Alcohol and Drug Problems Institute through the mechanism of Queens County Addiction Services. The content and effectiveness of these programs continued to be monitored and improved on a regular basis by the Director and staff. Despite continuing financial restraint, no programs were discontinued and expansion occurred rather markedly in the Non-Residential Rehabilitation Program, and in the Children of Alcoholics Program for adolescents. We continued to receive referrals from the same community resources as previous years, and treatment of persons under the Highway Safety Division Program became stabilized and improved.

A four-session series was instituted for the parents of adolescents engaging in our Non-Residential Adolescent Addiction Program, as well as a continuing aftercare group for persons engaging in this four-session series. Our informational efforts directed towards the school system, professionals, and community groups, continued as previously with major assistance being provided in professional group awareness sessions by the Central Office of Addiction Services of Prince Edward Island.

The programs presently operative to provide services to alcoholics and other chemically dependent persons, as well as to their families, include the following, which are a reiteration of our previous reports:

1. Residential Detoxification Program.
2. Residential Rehabilitation Program.
3. Residential Assessment Unit.
4. Residential Halfway House.
5. Non-Residential Services, including the following:
   (a) Non-Residential Rehabilitation Program.
   (b) Non-Residential Family Program.
   (c) Adolescent Treatment Program.
   (d) Children of Alcoholics Programs.
   (e) Parents' Program.
6. Aftercare Programs.
7. Parole Program.
8. Impaired Driver Program.
9. Public Relations and Information Program, including School Program.

In this yearly report, the statistical summaries of each of these Departments for the year 1985-86 will be presented along with comparisons with the previous year. It has been noted that one of the major areas of increasing referrals has been in the adolescent children of alcoholics, namely, those from age 13 to 18, in which 45 persons were engaged in a program compared to 9 in the previous year. This markedly increased the total attendance at this portion of our Children of Alcoholics Program. The other area where a marked increase had occurred was in the Non-Residential Rehabilitation Program, where the increase in numbers has been almost 100 persons, from 276 to 354. It is noted that in 1981-82, which was the first year of operation of this program under Queens County Addiction Services, the number processed was 197. This number has almost doubled over the past five years.

It was not possible to engage in any new initiatives other than the Parents of Adolescent Alcoholics Program, which was instituted outside the budget of Queens County Addiction Services. The continuing demand for services was carried on in an effective and efficient manner by the same number of staff that treated less people previously.

We continue to have an excellent liaison with Alcoholics Anonymous, in that the groups in the greater Charlottetown area presented a session once weekly to those in the Residential Rehabilitation Program, and visitations were carried out twice weekly in the evening by representatives of Alcoholics Anonymous groups to residents in this program. We continue to refer all of our residents engaging in either the Non-Residential or the Residential Rehabilitation Program to Alcoholics Anonymous. In addition to this, all those engaging in the Family Program are referred to Al-Anon family groups and those in the Children of Alcoholics Program to Alateen. So adult children of alcoholics whom we basically assess and treat on an individual basis are referred to the adult children of alcoholics groups in the community. There were also multiple referrals to Narcotics Anonymous.

The Director and staff of the Institute continue to have excellent relationship with the various Government Departments, with whom we are almost in daily contact, as well as with the Unit III school system. The staff of the Emergency Department of the Queen Elizabeth Hospital continue to make emergency referrals to us, and continue to cooperate with us in assessing persons in our Detoxification Unit who are suffering from major physical ailments.

RESIDENTIAL DETOXIFICATION UNIT - PHASE I

There was no change in the functioning of this Unit during the year 1985-86, with the number of beds, the staffing, and the programs remaining consistent. The staff are responsible for admissions, smooth detoxification of clients from alcohol, sedative drugs, and marijuana, physical and social assessments and motivation towards further treatment.

The nursing staff of the Unit continues to serve as a major liaison between the client and the various community groups that may be involved in his or her care.

During the year the number of compulsory clients continued to increase with mandatory treatment being provided for those from Social Services, the Parole System, employers, referrals under the Mental Health Act, and Probation Services.

The number of admissions to the Detoxification Unit continued at about the same number as the previous three years, being 814 admissions compared to 798 in 1984-85. The average number of monthly admissions was 68, of which 24 per month were new admissions, for a total of 288 during the year. This percentage of admissions continues to be about one-third of our total admissions, which is felt to be adequate.

The number of male admissions increased slightly in 1985-86, where the number of female admissions decreased slightly. These numbers are not considered too significant. The average length of stay in the Detoxification Unit was approximately 7 days. It should be noted that those who were to engage in the Residential Rehabilitation Program, and who were admitted in an abstinent condition, were still admitted to the Detoxification Unit initially.

During the year 1985-86 the total number of admissions to the Detoxification Unit who continued with the Residential Rehabilitation Program was 357, which is comparable to the 361 who engaged in the Program during the previous year. The percentage referred to Phase II was 44 percent, which was exactly the same figure as 1984-85.

The average age of admissions for males remained at around 41 years, while those for females increased slightly to 42 years.

The total number of persons certified under the Mental Health Act increased to 98 from 84 the previous year. The number during this year was comparable to the year 1983-84, and continued to be somewhat more than 10 percent of our total admissions. The total number of employer clients remained almost the same with a slight increase from 55 to 58.

Urinary assays of selected clients for cannabis and benzodiazepines continue to be carried out by the nursing staff.

It is noted that the total number of Social Service Department referrals have decreased from 72 to 55 during this year, and in fact have decreased from 113 in 1983-84. The number dependent or cannabis has decreased from 269 in 1984-85 to 135 this year.

STATISTICAL SUMMARY

	1984-85	1985-86
Total Number Admissions	798	814
Total Number Male Admissions	646	670
Percentage of Male Admissions	81%	82%
Total Number Female Admissions	152	144
Percentage of Female Admissions	19%	18%
Average Number Monthly Admissions	67	68
Average Number Monthly New Admissions	23	24
Total Number New Admissions	339	337
Average Length of Stay - Males	6 days	6 days
Average Length of Stay - Females	6 days	6 days
Total Number Referred to Phase II	355	357
Percentage of Total Admissions to Phase II	44%	44%
Average Monthly Number Referred to Phase II	30	30
Average Age - Males	42 years	41 years
Average Age - Females	39 years	42 years
Total Number Persons Certified	84	98
Average Number Monthly Certified	7	8
Total Number Social Service Referrals (Residential)	72	55
Total Number Admissions Dependent on Cannabis	269	135
Total Number Employer Clients (Residential and Non-Residential)	55	58

RESIDENTIAL REHABILITATION PROGRAM - PHASE II

The length of stay recommended for persons in this segment of the program remained at 21 days, or approximately three weeks. All admissions to the unit continue to come through the Detoxification Unit. The number of staff and program in this Unit was unchanged from the previous years. The occupancy rate for this Unit was approximately 85 percent during the year.

This program has as its major objective to fulfil a need to provide a program of information and group therapy to alcoholics and other chemically dependent persons following their detoxification. The major functions of the program were to provide identification, motivation, and insight into their disease of chemical dependency and alcoholism. The recovery rate in persons engaging in this segment of the program, namely, Phase II, are approximately five times as high as those who are merely detoxified.

The number of admissions to the Residential Rehabilitation Program remained relatively stable during this year, being 357 as compared to 361 the preceding year. Slightly less than 20 percent of these were females.

It is noted that the average age of persons in the Residential Rehabilitation Program is markedly lower than that in the Detoxification Unit as a whole. This number continues to decrease and during the year 1985-86 was 34 years old for males, and 32 years old for females, almost ten years younger than the average age in the Detoxification Unit.

During the year we continued to accept referrals from Kings County for the Rehabilitation Program, and the numbers had increased from 41 the previous year, to 53 this year. During the year there were 35 clients referred from the Federal Justice System on parole for our Rehabilitation Program, compared to 33 the previous year.

As noted previously, the program was unchanged from previous years, and consisted of informational sessions each morning, group therapy sessions daily each afternoon, individual counselling, Alcoholics Anonymous meetings, written self-analysis and identification of problem living areas, as well as the development of a continuing recovery program following discharge.

STATISTICAL SUMMARY

	1984-85	1985-86
Total Number of Admissions	361	357
Total Number of Male Admissions	291	295
Total Number of Female Admissions	70	62
Average Number Monthly Admissions	30	30
Average Age - Males	36 years	34 years
Average Age - Females	31 years	32 years
Average Length of Stay	17 days	18 days
Total Number of Admissions - Parole	33	35
Total Number of Referrals from Kings County	41	53

RESIDENTIAL ASSESSMENT UNIT - POLICE UNIT

This Unit provides emergency supervision, medical care, and assessment to those persons apprehended for public drunkenness by the police, or referred to our services from the Out-Patient Department of the Queen Elizabeth Hospital for short-term care and assessment, or those persons only requesting or requiring short-term detoxification. There was no change in the composition of this Unit (eight beds), or any deletions or additions to the normal number of staff. The staff continued under the supervision of the nursing staff of the Detoxification Unit. Admissions to the Unit are either brought by the police or screened through the Nurse in charge of the Detoxification Unit.

The Unit continues to be extremely important to the total functioning of Queens County Addiction Services, as well as to the community, since it provides an emergency service to police and hospital as well as preventing short-term detoxification and revolving door persons from being admitted to the regular Detoxification Unit.

The number of admissions to this Unit decreased somewhat during 1985-86 to 1,290, which is equivalent to the number of admissions in 1983-84. The previous year it was much higher at 1,643. However, it was noted that the total number of individuals accepted increased by 80, despite the decrease in the number of total admissions. The average number of monthly admissions was 108, compared to 137 last year. The decrease was mainly in the area of police referrals, which had decreased by 250 persons. The number of non-police referrals had increased by 50 people.

The number referred from the Assessment unit for further treatment remained in the same vicinity with 179 being referred this year, compared to 186 the year before. The average length of stay remained stable at 1.5 days.

STATISTICAL SUMMARY

	1984-85	1985-86
Total Number Referrals	2,174	1,960
Total Number Admitted	1,643	1,290
Total Number of Individuals Admitted	763	844
Average Monthly Admissions	137	108
Total Number of Police Referrals	1,711	1,473
Total Number of Non-Police Referrals	434	484
Total Number Transferred to Provincial Correctional Centre	716	757
Number Referred to Further Treatment	186	179
Average Length of Stay	1.5 days	1.5 days

RESIDENTIAL HALFWAY HOUSE - TALBOT HOUSE

Once again, there was no change in the functioning or staffing of the Queens County Extended Care facility, known as the Talbot House, during 1985-86. The number of beds in the facility remained at twenty-one, all of which were designated as male. The occupancy rate remained around 80 percent. The recommended length of stay was two months.

The total number of admissions increased slightly from 155 to 161, while the total number of individuals served was 120. The average length of stay was 34 days and the average age was 37 years, which was slightly less than the previous year when it was 40.

The statistics for this Unit have been relatively stable, as have the staff and the programs over the past four to five years. When possible, the majority of the residents who are capable are engaged at least in day jobs when these become available.

A program is presented daily to the residents to identify living problems and to increase their life skills. An aftercare group is also operating in this Unit, as are regular Alcoholics Anonymous meetings. The Unit also serves as a drop-in centre for those persons in Charlottetown who had previously been residents of the house or who had engaged in the Rehabilitation Programs previously.

STATISTICAL SUMMARY

	1984-85	1985-86
Total Number of Admissions	155	161
Total Number Individuals Served	116	120
Occupancy Rate	80%	78%
Average Length of Stay	33 days	34 days
Average Age	40 years	37 years
Total Number from Parole Services	33	35

NON-RESIDENTIAL REHABILITATION PROGRAM

The Morning Orientation or Non-Residential Rehabilitation Program continued with a similar type of program as it had in the past with similar staffing. Dr. Marjorie Smith, who was employed by Killorn Facilities, assisted the staff in this program as regards assessment, physical and mental treatment when necessary, and aftercare programming. The total number of persons engaging in this program increased very markedly during the year 1985-86, from 276 to 379. This is an increase of almost 200 in a period of two years. It is obvious that additional staff is necessary to handle this large increase in demand for our Non-Residential Program. The average number of monthly admissions was 32, in contrast to 23 the previous year, and 17 the year before that.

A very significant figure is that the total number of clients engaging in the combined Residential and Non-Residential Rehabilitation Program during the year 1985-86 was 733 individuals, 379 Non-Residential clients and 354 Residential clients. We are unaware of any place where such a small staff is providing such an extensive program to such a large number of residents.

It is noted that the total number of employer referrals decreased to 29 from 56 the previous year. The total number of Social Service referrals also decreased somewhat from the previous year, from 65 to 54. The average age of Non-Residential clients was 40 years, compared to 35 years for the Residential clients.

The significance of there being less mandatory referrals to the Non-Residential Program, despite a marked increase in the numbers, means that more clients are accepting voluntarily a Non-Residential program, at least initially in their recovery.

STATISTICAL SUMMARY

	1984-85	1985-86
Total Number Admissions (Residential)	361	354
Total Number Admissions (Non-Residential)	276	379
Total Number Engaging in Program	637	733
Average Monthly Admissions (Non-Residential)	23	32
Total Number Employer Referrals	56	29
Total Number Social Service Referrals	65	54
Average Age	41 years	40 years

NON-RESIDENTIAL FAMILY PROGRAM

This service continued to be conducted in a similar manner as in previous years with one Family Therapist being responsible for the entire program, with the assistance of other staff members and volunteers.

Admissions to this program occur in either one of two ways:

(a) either the family member is assessed by another staff member and referred to the Family Therapist for individual counselling, assessment and referral to the Family Program, or

(b) the person either comes voluntarily or is referred through one of the family services in Queens County directly to the Family Therapist.

The Family Orientation Program continued on Monday evenings with a ten-session, two-hour series. Concurrently with this the young children of alcoholics, age 7 to 13, also engage in a program. The average number of attendance at these Monday night programs were 29 adults and 19 children, for a yearly total of 750 adult family members and 762 children. The total number of individual consultations carried on by the Family Therapist was 762 in 1985-86, which was compared to 750 the year before.

The total number of family members served increased markedly to 2,395 from 1,788.

Once again, it appears obvious that this load is more than one person can adequately handle, and the services still require at least one additional Family Therapist to assist in this portion of the program.

STATISTICAL SUMMARY

	1984-85	1985-86
Total Number of Family Orientation Sessions	40	46
Total Number Attending Family Orientation Sessions	2,520	2,196
Total Number of Adults Attending Family Orientation Sessions	1,440	1,315
Total Number of Children Attending Concurrent Children of Alcoholics Program	1,080	881
Average Attendance, Monday Night Family Program -		
(a) Adults	36	29
(b) Children	27	19
Total Number Individual Consultations	750	762
Total Number of Family Members Served	1,788	2,395
Average Number in Family Aftercare Sessions, Adults	8	5

ADOLESCENT TREATMENT PROGRAM

The Adolescent Treatment Program for persons 18 years and under who were exhibiting problems with alcohol and/or other drugs continued during the fiscal year 1985-86. This program was under the supervision of the Alcohol and Drug Problems Institute, and was not included in the budget for Queens County Addiction Services. During the year the number of persons referred to this program were 49, of whom 35 were male, and 14 were female. The number of sessions presented in this program were similar to the previous year.

The Aftercare Program was continued for adolescents engaging in the Adolescent Treatment Program, which consisted of eight sessions on a twice-weekly basis. The Aftercare sessions continued for a period of six months and the average number in attendance at these sessions was 9 persons.

The total number of individual consultations during the year was 538, and this is a major part of the Adolescent Treatment Program, because in addition to consultation with the adolescents themselves, their parents are also provided with individual counselling sessions and appraisal of their needs.

STATISTICAL SUMMARY

	1984-85	1985-86
Total Number in Adolescent Treatment Program	43	49
Males	34	35
Females	9	14
Total Number Sessions Presented in Program	96	94
Total Attendance at Program	483	485
Average Number in Attendance at Aftercare Sessions	8	9
Number of Individual Consultations	650	538

CHILDREN OF ALCOHOLICS PROGRAM

This program was started during the year 1984-85 and was continued during 1985-86. The program was under the supervision of the Alcohol and Drug Problems Institute, and was not included in the budget for Queens County Addiction Services.

It is noted that during the year the number of individuals engaging in the pre-adolescent Children of Alcoholics Program decreased from 192 to 97, of which 46 of these were males and 51 females. At the same time the program for adolescent children of alcoholics increased from 9 to 45, with 18 being male and 27 females. The number of sessions presented for the children of alcoholics age 13 to 18 increased from 9 to 46, and this became a major portion of the program. The total attendance at the groups presented to children of alcoholics age 13 to 18 was 298 over the year.

In addition to the two younger age groups there were multiple consultations with adult children of alcoholics who were exhibiting mental or social problems connected with their co-dependency, either at present or in the past. The number of consultations in this group has increased markedly over the past year since the service was not available previously.

STATISTICAL SUMMARY

	1984-85	1985-86
Children of Alcoholics - Age 7 to 13		
Number of Participants	192	97
Male	92	46
Female	100	51
Adolescent Children of Alcoholics		
Number of Participants	9	45
Male	1	18
Female	8	27
Number of Sessions Presented - Age 7 to 13	45	45
Total Attendance - Age 7 to 13	1,080	730
Number of Sessions Presented - Age 13 to 18	9	46
Total Attendance - Age 13 to 18	61	298

AFTERCARE PROGRAM

The Aftercare Programs are considered an essential part of our total program and are described as Phase III of our treatment program, with Phase II being the Rehabilitation and Information Programs presented. Aftercare Programs are recommended for: (a) all persons who have completed either the Residential or Non-Residential Rehabilitation Programs, (b) all those who have completed the Adolescent Treatment Program, and (c) selected persons who have attended the Family Orientation Program. The length of stay in Phase III is recommended to be six months on a weekly basis, but this may be extended under certain circumstances.

The post-Rehabilitation Aftercare Program for 1985-86 was increased to 8 groups, from 4 at the beginning of 1984. The number of aftercare sessions increased markedly from 260 to 350, with the average number in attendance also increasing to 10.2 per group. The total number of persons served was almost 100 more than the previous year, being 303 as compared to 226. The number completing these programs has also increased from 60 to 108.

One of the major difficulties in our program is to retain people in the Aftercare Program for a sufficient period of time to permit an adequate recovery, and in this area we need to improve our retention rate.

There continued to be frequent communication between the leaders of aftercare groups and the Phase II Addiction Therapists, and a monthly meeting continued to be held at which time administrative and other problems were discussed between the group leaders, the Director, and the therapy staff.

The other aftercare groups, namely the adolescent aftercare groups and the family aftercare groups are presented under their specific heading.

STATISTICAL SUMMARY

	1984-85	1985-86
Number of Aftercare Groups	4-7	6-8
Number of Aftercare Sessions	260	350
Average Number in Attendance	8.5	10.2
Total Number of Persons Served	226	303
Number Completing Aftercare Program	60	108

PAROLE PROGRAM

The Parole Program continued during the year 1985-86 as in the previous year. The program recommended for these inmates was to spend three weeks in the Rehabilitation Program at the Alcoholism Treatment Centre followed by two months at the Queens County Halfway House. The majority of the persons who entered this program completed the program with no particular difficulty and the recidivism rate was noted to be markedly decreased in the individuals.

The number of parolees treated during 1985-86 was 35 compared to 33 the previous year.

STATISTICAL SUMMARY

	1984-85	1985-86
Number Persons Completed Program	33	35

IMPAIRED DRIVER PROGRAM

This program, which the Alcohol and Drug Problems Institute operates in conjunction with the Highway Safety Division, continued during the year 1985-86. It had begun in January of 1985. The program involved assessment of persons who had been convicted three or more times of impaired driving and who had become eligible for reinstatement of their driving license. On assessment the vast majority of these persons were referred to either a Residential or Non-Residential Rehabilitation Program, followed by a six month to one year Aftercare Program. Reports were sent to the Highway Safety Division on a monthly basis, and it was on the basis of these reports that the Division decided whether or not to reinstate the person's driving privileges.

The number of persons processed under this program from April 1, 1985 to March 31, 1986 was 155, and 131 took and completed a recovery program.

Since it was necessary for the regular staff to absorb the additional work required for assessment and reporting on this group of persons, we attempted to develop a contractual arrangement with the Highway Safety Division for the employment of one person to deal with this large group of individuals. Unfortunately, this was not effected, and the function was carried out by the employee designated for general public and school information programs.

STATISTICAL SUMMARY (QUEENS COUNTY)

Total Number Assessments	155	
Total Number Completed Non-Residential Program		90
Total Number Completed Residential Program		41
		131
Service Provided to Highway Safety Division		
Referrals from Kings County:		
Non-Residential		20
Residential		41
		61
Total (Queens County and Kings County)		192

PUBLIC RELATIONS AND INFORMATION PROGRAM

This program in Queens County was under the direction of the Community Development Coordinator in 1985-86, and the activities were, for the most part, similar to that of the previous year. We continued with our program for the elementary and junior high schools, as well as providing several sessions to the senior high schools.

The informational services were also provided to professional groups in the Queens County area, in many cases in cooperation with the Community Development Coordinator of the Central Office. The emphasis in community groups continued to be on youth and their problems with alcohol and various chemicals.

In-service training sessions were provided during the year by a two-day workshop presented by Jack Blanchard of Student Services, University of Prince Edward Island. These sessions were presented in coordination with the other two Counties, and were mainly focussed on personal development and were of great value to the staff. There were no outside speakers for staff training because of the restraint program.

A one-day session was also provided for the Aftercare leaders by the Alcohol and Drug Problems Institute and was attended by Aftercare leaders from the three Counties.

Goals for 1986-87

Elementary Schools

As most of the material we deal with is beyond this level and our past involvement has been more than compensated for in improved school curriculum, we are satisfied with our involvement here.

Junior High Schools

This is a crucial area in adolescent development and has been the basis of our programs for schools. Although the program, a field trip to our facility, is stable, we are only reaching 50 percent of the schools. This year we will be offering sessions to all the junior high schools by approaching them at the administrative level.

Senior High Schools

As only one school took advantage of our services last year, it is obvious that there is a great deal of work to be done here. We will be consulting with the Guidance Counsellors to design a series of programs which are appropriate for this grade level and hope to bring the number of students reached to at least 250.

Mature Students and Community Groups

We are generally content with our involvement here, although we have concern about making inroads at the University of Prince Edward Island. The major idea to pursue is the development of a credit course in chemical dependency at the University.

STATISTICAL SUMMARY

	1984-85	1985-86
Total Sessions (Grade VI & VII)	63	42
Total Attendance	2,658	885
Total Sessions (Sr. High & Mature Students)	5	19
Total Attendance	209	172
Total Sessions (Community Groups)	13	15
Total Attendance	434	324
Total Number of Sessions		76
Total Number of Individuals		1,381

PRINCE COUNTY ADDICTION SERVICES INC.

216 Schurman Avenue
Summerside, P.E.I.
C1N 4W6

TELEPHONE: 436-4201

BOARD OF DIRECTORS
PRINCE COUNTY ADDICTION SERVICES INC.
APRIL 1, 1985 - MARCH 31, 1986

Mr. Maynard Schurman, Chairman

Mrs. Pauline Deighan

Mr. Blair Heeschen

Rev. J.H. LeClair

Mr. Raymond MacDonald

Mr. Neil MacLeod

Mr. Alan Montgomery

MANAGEMENT PERSONNEL

Mrs. Betty Campbell, R.N.	Prince County Director
Mrs. Amy Gaudet, R.N.	Nursing Supervisor Primary Care Unit
Mr. Michael Fitzpatrick	Rehabilitation Supervisor Intermediate Care
Mr. Gerald Rooney	Chief Attendant St. Eleanor's House
Dr. Sheldon R. Cameron	Medical Consultant

PRIMARY CARE (DETOXIFICATION PROGRAM)

The Primary Care Unit located in the basement of the Prince County Hospital's Nurses Residence carried out its objectives in much the same manner as in previous years. These objectives are to provide safe medically supervised detoxification from all mood-altering chemicals, instruction of clients as to the nature of their addiction and motivation to further treatment.

Self or family referrals continue to be the main referral source for this unit accounting for approximately 56 percent of the referrals. The remainder of the referrals are made by agencies such as hospitals, physicians, and various areas of the justice system.

As predicted in the previous reporting period the demand for service from this unit increases yearly. The average occupancy rate for the year is 93 percent with February and March being the peak periods at 98 percent and 100 percent respectively. Because of this high occupancy rate, beds are seldom available at the time they are needed and clients must wait in some cases several days for admission. Under these circumstances, it is becoming increasingly difficult to provide emergency service for those who require it.

STATISTICAL SUMMARY

Total Number of Admissions	675
Total Number of Male Admissions	587 (87%)
Total Number of Female Admissions	88 (13%)
Total Number of Individuals	416
Total Number of New Clients	159
Average Age - Male	42
Average Age - Female	43
Average Length of Stay - Male	8 days
Average Length of Stay - Females	15 days
Average Occupancy Rate	93%

DETOX. VOLUNTEER FOLLOW-UP PROGRAM

This program is conducted by a group of volunteers composed of people who are recovering from chemical dependency. It operates under the direction of the Detox. Nursing Supervisor and a volunteer Coordinator. There are approximately 90 volunteers involved in the program. Its objectives are:

(1) To provide an ongoing community support system for clients both during treatment and following discharge.

(2) To assist the Agency's follow-up services.

(3) To utilize valuable community volunteer workers.

(4) To strengthen communication and maintain rapport between the Agency, the program of Alcoholics Anonymous and the general public.

The program operates according to a rotating monthly schedule set up by the Coordinator. Teams of two volunteers visit the Detox. Unit twice a week to interview those clients who have given written consent to see them. During the visit, the client is encouraged to choose a contact from his or her own community for additional support and introduction to a local A.A. group when he/she returns home. The contact is immediately established by telephone and the contact's name and telephone number are recorded on the client's file for future reference.

This program has been in operation for several years and has proven to be a valuable asset to both the Agency and its clients. Its success is due to the continuing dedication of the Coordinator and the many volunteers.

STATISTICAL SUMMARY

Total Number of Contacts Made		295
Summerside and Area	96	
West Prince	140	
East Prince	49	
Kings County	1	
Queens County	5	
Other	4	

INTERMEDIATE CARE (REHABILITATION PROGRAM)

The Intermediate Care Program provides the second phase of treatment for chemical dependency. The main requirement for admission to the program is that the client must be adequately detoxed from all mood-altering chemicals.

The program is of three weeks' duration and may be taken as a resident or day case dependent on the decision of the admissions staff. This decision is based on several factors such as the availability of transportation, the stability of the home environment, the severity of the dependence and the client's motivation to remain abstinent during treatment. The treatment regime is identical for residential and non-residential clients as they are intermingled in the same therapy group. Residential clients are housed in either the Primary Care Unit or the Extended Care Facility, St. Eleanor's House.

In a closed, small (maximum twelve members) group setting the nature of chemical dependency is explored in depth. The negative effects on the physical, emotional, social and spiritual well being of the individual are emphasized. Guidelines to successful recovery are suggested and effective living without the use of mood-altering chemicals is promoted. Various techniques employed include lectures, video tapes, group discussion and guest speakers.

During the program clients are encouraged to view the group as their main support system and to maintain contact with group members after completion of the program. This is promoted in recognition of the fact that the group as a whole can be more effective in this capacity than individual counsellors. It also avoids the situation of clients becoming overly dependent on the counselling staff.

Emphasis is placed on Aftercare as a critical component of the overall recovery process. Upon completion of the Intermediate Care Program, participants are referred to the third treatment phase which is attendance at a weekly Aftercare group for a one-year period. It is also recommended that they attend a minimum of three A.A. meetings a week.

Repeat admissions to the Intermediate Care Program are not made for a minimum of one year and then only at the discretion of staff. In the event of a return to chemical use, clients are referred to the Primary Care Unit and encouraged to resume their Aftercare recommendations following detoxification.

This program is also much in demand and is usually booked at least two programs in advance. This means that clients must wait three to six weeks for admission.

The majority of referrals to this program are received from various areas of the Justice system. Another significant source of referral is the Highway Safety Division.

STATISTICAL SUMMARY

Total Number of Admissions	182	
Total Number of Individuals	180	
Total Number of New Admissions	152	(83.5%)
Total Number of Male Admissions	166	(91%)
Total Number of Female Admissions	16	(9%)
Average Age - Male	34	
Average Age - Female	34	
Total Number of Residential Clients	84	
Total Number of Non-Residential Clients	98	
Total Number of Justice Referrals	91	
Total Number of Highway Safety Referrals	29	

AFTERCARE PROGRAM

Following completion of the Intermediate Care Program, clients are enrolled in a structured Aftercare Program. They are strongly encouraged to attend and complete the third phase as it is considered to be a final component of the complete treatment process. It is designed to assist the client to maintain long-term abstinence and reinforce the lifestyle changes promoted during the earlier treatment phases.

During the previous reporting period, the structure of the Aftercare Program was changed considerably. It continues to function in the same manner with eight small groups who meet weekly under the leadership of individuals from the community who have experienced chemical dependency themselves and have acquired stability in their personal recovery. Two of these Aftercare groups are conducted in the West Prince area to provide easier access for residents from that area.

Clients are encouraged to complete the full Aftercare phase. The recommended length of time is one year.

STATISTICAL SUMMARY

Total Number of Groups	8
Total Number of Group Sessions	375
Average Group Size	9
Total Number of Individuals	280

FAMILY CARE

Various services are provided for the family of the chemically dependent individual by this Agency.

A structured Family Information Program consisting of one evening session weekly for nine weeks is conducted by the Family Counsellor at the Addiction Center in Summerside. The program is open-ended and recycles every nine weeks. Although especially intended for family members of clients in treatment it is also open to any individual in the community who is affected by or concerned about another's chemical use regardless of whether or not that person has been exposed to treatment. Two general topics "Addictions" and "Family Recovery" are dealt with during the nine weeks by use of films, lectures and group discussions.

In order to provide family services for residents of West Prince, one full cycle of the Family Information Program has been conducted in the Westisle Composite School each fall for the past several years.

In addition to the Information Program, other services are provided for the family. The Family Counsellor contacts some family member of every client who is admitted to any one of our treatment programs. Individual counselling is provided as well as referrals to other agencies and to self-help groups such as Al-Anon and Alateen.

Information sessions on the family effects of chemical dependency are also provided for clients in treatment in both Primary and Intermediate Care Programs. These are also conducted by the Family Counsellor.

STATISTICAL SUMMARY

Total Number of Individuals	545
Total Number of Office Consultations	446
Total Number of Telephone Consultations	801
Total Number of Large Group Sessions	55
Total Number in Attendance	1,115
Average Group Size	20
Total Number of Small Group Sessions	112
Total Number in Attendance	1,237
Average Group Size	11

WEST PRINCE FAMILY INFORMATION PROGRAM

Total Number of Group Sessions	9
Average Group Attendance	30
Total Number of Individuals	88

WEST PRINCE COUNSELLING SERVICE

A community addictions counselling resource is provided in the western area of Prince County. Staffed by one full-time Counsellor with a back-up of other staff of the Agency, this service provides assessment, counselling, referral and follow-up counselling for residents of West Prince.

The Counsellor has office hours in the Western Hospital, Alberton, two mornings a week and in the Regional Services Centre, O'Leary, two mornings a week. A great deal of his time is spent making home visits in response to requests from residents of the area.

The Counsellor also conducts group sessions weekly in the Primary Care Unit to familiarize clients from West Prince with his services and to develop follow-up plans following their discharge. In addition, the Counsellor conducts a weekly Aftercare group in Alberton. An Aftercare group is also conducted once a week in Tignish.

STATISTICAL SUMMARY

Total Number of Individuals Served	185
Total Number of Home Visits	328
Total Number of Detox. and Hospital Visits	57
Total Number of Office Visits	137

EXTENDED CARE

The Extended Care Facility "St. Eleanor's House" is the oldest treatment facility in Prince County. During this reporting period it continued to function in a similar manner as in previous years. The referrals to this facility from the Justice system continue to increase.

The house accommodates ten men and provides a home-like environment for those who require extended support after initial treatment of chemical dependency.

The house program is aimed at reinforcing the guidelines to recovery introduced during earlier treatment phases by daily exposure to films, group discussions and A.A. meetings. The house rules and work therapy are some of the methods used to assist residents in adopting more appropriate lifestyles. Clients are encouraged to seek employment as soon as they are considered to be stable in their recovery. If unemployed, referrals are made to Canada Employment and Immigration as well as other agencies for programs such as upgrading educational levels, vocational training or work adjustment training and other similar projects.

As staffing is minimal in this facility, residents are responsible for housekeeping, laundry, maintenance, gardening and grounds-keeping duties. These duties are assigned on a weekly schedule and each resident is responsible to carry out his assigned tasks.

Residents are gradually prepared for stable re-entry to the community and encouraged to regain family ties where possible.

STATISTICAL SUMMARY

Total Number of Admissions	93
Total Number of Individuals	79
Number of New Admissions	58
Average Age	33
Average Length of Stay	36 days
Occupancy Rate	87%

NON-RESIDENTIAL SERVICES

In addition to the structured treatment programs, the Agency provides various non-residential services such as: assessment and intervention interviews, individual counselling, follow-up counselling, Antabuse administration, and drug screening. The major sources of referral for these services continue to be from various areas of the Justice system, Highway Safety Division and employers. These services are mainly provided by the Counselling and Nursing staff of the Agency.

A number of these non-residential services are provided outside the Agency's facilities. These would include such areas as hospitals and provincial correctional institutions.

STATISTICAL SUMMARY

Total Number of Individuals Seen	885
Total Number of Telephone Consultations	1,448
Total Number of Office Visits	1,357
Total Number of Visits Outside the Agency	72

COMMUNITY DEVELOPMENT SERVICES

This program complements the treatment services of the Agency in attempting to reduce alcohol and other drug problems in the community.

Under the direction of a Community Development Coordinator, many approaches are used in raising public awareness of issues related to chemical dependency. Focusing mainly on youth, the majority of the Coordinator's time is spent in conducting information sessions in schools and other youth groups as well as working with parent groups. Information sessions are also presented to other community and professional groups. A great deal of information is disseminated to the general public by use of the media, public displays and the maintenance of a resource library at the Addiction Centre in Summerside. This lending library is available for public use.

The Coordinator also serves on a Provincial committee to develop and coordinate Provincial projects such as Drug Awareness Week.

During this reporting period a new Information Program was developed primarily for referrals from the Highway Safety Division. A number of referrals from this source were assessed as chemical abusers who, while not requiring a full treatment program, were in need of information regarding chemical abuse. This program is coordinated and mainly conducted by the Community Development Coordinator and consists of one half-day session per week for four weeks.

STATISTICAL SUMMARY

Type of Group	No. of Sessions	Average Group Size	Total Attendance
School Students	50	32	1,617
Mature Students	12	13	154
Community	26	26	684
Professional Groups	8	12.5	100
Parents Care Program	5	63	315
Alcohol/Drug Abuse Information for Impaired Drivers	16	8	124

MISCELLANEOUS ACTIVITIES

Displays	34
Meetings	106
Media Activities	9
Other	3

ADDICTION SERVICES

CHARLOTTETOWN, P.E.I.

FINANCIAL STATEMENTS

MARCH 31, 1986

AUDITORS' REPORT

Central Advisory Board of Addiction Services

We have examined the balance sheet of Addiction Services as at March 31, 1986 and the statement of revenue and expenditure for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as we considered necessary in the circumstances.

In our opinion these financial statements present fairly the financial position of the corporation as at March 31, 1986 and the results of its operations for the year then ended in accordance with generally accepted governmental accounting principles applied on a basis consistent with that of the preceding year.

Charlottetown
Prince Edward Island

July 7, 1986

Doane Raymond

Chartered Accountants

ADDICTION SERVICES

BALANCE SHEET

MARCH 31, 1986

ASSETS	1986	1985
Current		
Cash	$ 19,559	$ 18,270
Receivables	6	54
Prepaid expenses	1,160	688
	20,725	19,012
Land, buildings, and equipment (Note 2)	231,539	233,242
	$252,264	$252,254
LIABILITIES		
Current		
Payables and accruals	$ 3,514	$ 871
Long term debt payable within one year	41,540	2,100
	45,054	2,971
Long term (Note 3)	191,882	233,042
Payable to the Province of Prince Edward Island (Note 4)	15,328	16,241
	$252,264	$252,254

Subsequent event (Note 5)

ON BEHALF OF THE BOARD

.....Director

.....Director

ADDICTION SERVICES

STATEMENT OF REVENUE AND EXPENDITURE

YEAR ENDED MARCH 31, 1986

	1986	1985
Revenue		
Grant - Province of Prince Edward Island	$2,791,469	$2,699,684
Patient fees	13,310	21,309
	2,804,779	2,720,993
Expenditure		
Direct (page 5)		
Detoxification	1,618,136	1,627,107
Rehabilitation	650,404	598,670
Short term care	333,605	331,636
Long term care	3,171	6,630
	2,605,316	2,564,043
Central office and administration		
Administration	8,648	2,378
Equipment	594	518
Materials and supplies	9,077	7,226
Professional fees	9,145	13,026
Salaries and benefits	154,024	111,621
Travel	5,578	5,293
	187,066	140,062
	2,792,382	2,704,105
Excess of revenue over expenditure	$ 12,397	$ 16,888

ADDICTION SERVICES

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 1986

1. Accounting policies

(a) Financial statement reporting

These financial statements include the accounts of Addiction Residences Inc., which is a non-profit organization incorporated in June, 1977 and which is fully funded through Addiction Services.

As of October, 1980 the services administered by the Addiction Foundation of Prince Edward Island were contracted out to three individual county boards. The accounts are recorded on a combined basis for the province and administered by a central board under the name of Addiction Services. However, the counties are charged with related expenditures and are budgeted accordingly.

(b) Depreciation

The charge for annual depreciation is equal to the principal reduction of the mortgages on the respective properties for the year.

(c) Furniture and equipment

Furniture and equipment are carried at a nominal value of $1. Purchases of equipment are treated as expenditure in the year they occur.

(d) Profit or loss

The excess of revenue over expenditure for the year is transferred to the Province of Prince Edward Island according to the accounting treatment policy of the Provincial Treasury Board.

ADDICTION SERVICES

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 1986

2. Land, buildings and equipment

	1986			1985
	Cost	Accumulated Depreciation	Net Book Value	Net Book Value
Land				
Georgetown	$ 1,000		$ 1,000	$ 1,000
Fredericton Farm	4,335		4,335	4,335
McQuaid	30,000		30,000	30,000
Kings County Detox Centre	10,300		10,300	10,300
Buildings				
Georgetown	18,000	$ 7,631	10,369	10,965
Fredericton Farm	34,853	2,328	32,525	32,757
McQuaid	104,633	3,726	100,907	101,562
Kings County Detox Centre	43,308	1,206	42,102	42,322
Equipment	1		1	1
	$246,430	$ 14,891	$231,539	$233,242

3. Long term debt

	1986	1985
11% mortgage due 2014 repayable in equal monthly installments of principal and interest, providing McQuaid property as security.	$132,288	$132,943
10% mortgage due September 1, 1986 amortized to 2014, repayable in equal monthly installments of principal and interest, providing Fredericton Farm as security. Subsequent to year end, this mortgage was paid out.	39,440	39,688
9 5/8% mortgage due 2019 repayable in equal monthly installments of principal and interest, providing Kings County Detox Centre as security.	51,443	51,664
12 1/2% mortgage due 1988, amortized to 1994, repayable in equal monthly installments of principal and interest, providing Georgetown property as security.	10,251	10,847
	233,422	235,142
Amount payable within one year	41,540	2,100
	$191,882	$233,042

ADDICTION SERVICES

NOTES TO FINANCIAL STATEMENTS

MARCH 31, 1986

4. Payable to the Province of Prince Edward Island

	1986	1985
Balance, beginning of year	$ 16,241	$ 20,662
Patient fees collected	(13,310)	(21,309)
Excess of revenue over expenditure	12,397	16,888
Balance, end of year	$ 15,328	$ 16,241

5. Subsequent event

Subsequent to year end, land and building known as the Fredericton Farm was sold for $23,950.

6. Government assistance

(a) Kings County Detox Centre

A loan of $66,000 from Canada Mortgage and Housing Corporation (CMHC) in 1977 was reduced by a federal capital contribution of $5,850 and a Residential Rehabilitation Assistance Program (RRAP) loan of $7,500. To March 31, 1986, $135 of the federal capital contribution and $7,500 of the RRAP loan have been forgiven.

Provided the project is managed and operated within the terms and conditions of the mortgage and the operating agreement with CMHC the loans will not require repayment.

(b) Interest reduction assistance

Federal interest assistance is being provided to effect a rate of 8% interest on the Kings County Detox Centre mortgage and 2% on the McQuaid property mortgage.